

**Interim Designation of Agent to Receive Notification  
of Claimed Infringement**

**Full Legal Name of Service Provider:**  
OMNIPOD, Inc.

**Alternative Name(s) of Service Provider (including all names under which the  
service provider is doing business):**  
(None)

**Address of Service Provider:**  
OMNIPOD, Inc.  
41 East 11th Street, 10th Floor  
New York, NY 10003

**Name of Agent Designated to Receive Notification of Claimed Infringement:**  
Gwen Lighter

**Full Address of Designated Agent to which Notification Should be Sent:**  
OMNIPOD, Inc.  
41 East 11th Street, 10th Floor,  
New York, NY 10003

**Telephone Number of Designated Agent:** (212) 331-1125  
**Facsimile Number of Designated Agent:** (212) 331-1194  
**Email Address of Designated Agent:** gwen@omnipod.com

**Signature of Officer or Representative of the Designating Service Provider:**

\_\_\_\_\_ Date: March 20, 2000

Gwen Lighter  
Executive Vice President of  
Business Development and Legal Affairs

*Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee  
Made Payable to the Register of Copyrights.*

**RECEIVED**

MAR 20 2000

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